

# Evaluation of Chloropicrin as a Toxic Air Contaminant

## Part B. Human Health Assessment

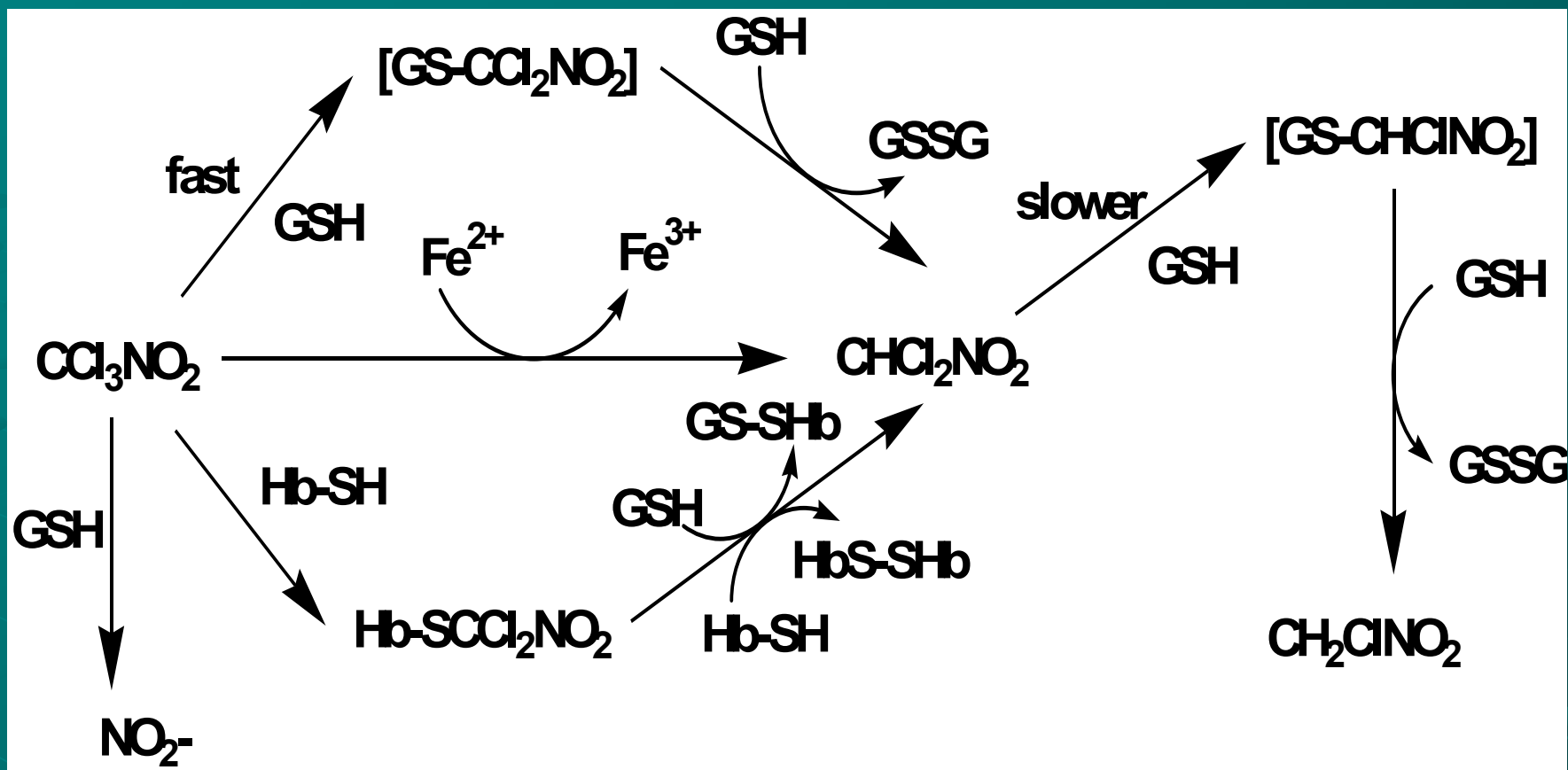
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# Historical Background

- Chloropicrin was used as a warfare agent in WWI
- First used as a fumigant in flour mills in 1926
- NIOSH IDLH – 2 ppm
- ACGIH TWA-TLV – 0.1 ppm
- DPR placed chloropicrin into reevaluation based on air monitoring data with levels greater than TLV



**Figure 1** (p. 9). Proposed pathways for reaction of chloropicrin with glutathione and hemoglobin

# Acute Toxicity – 1 Hour Exposure

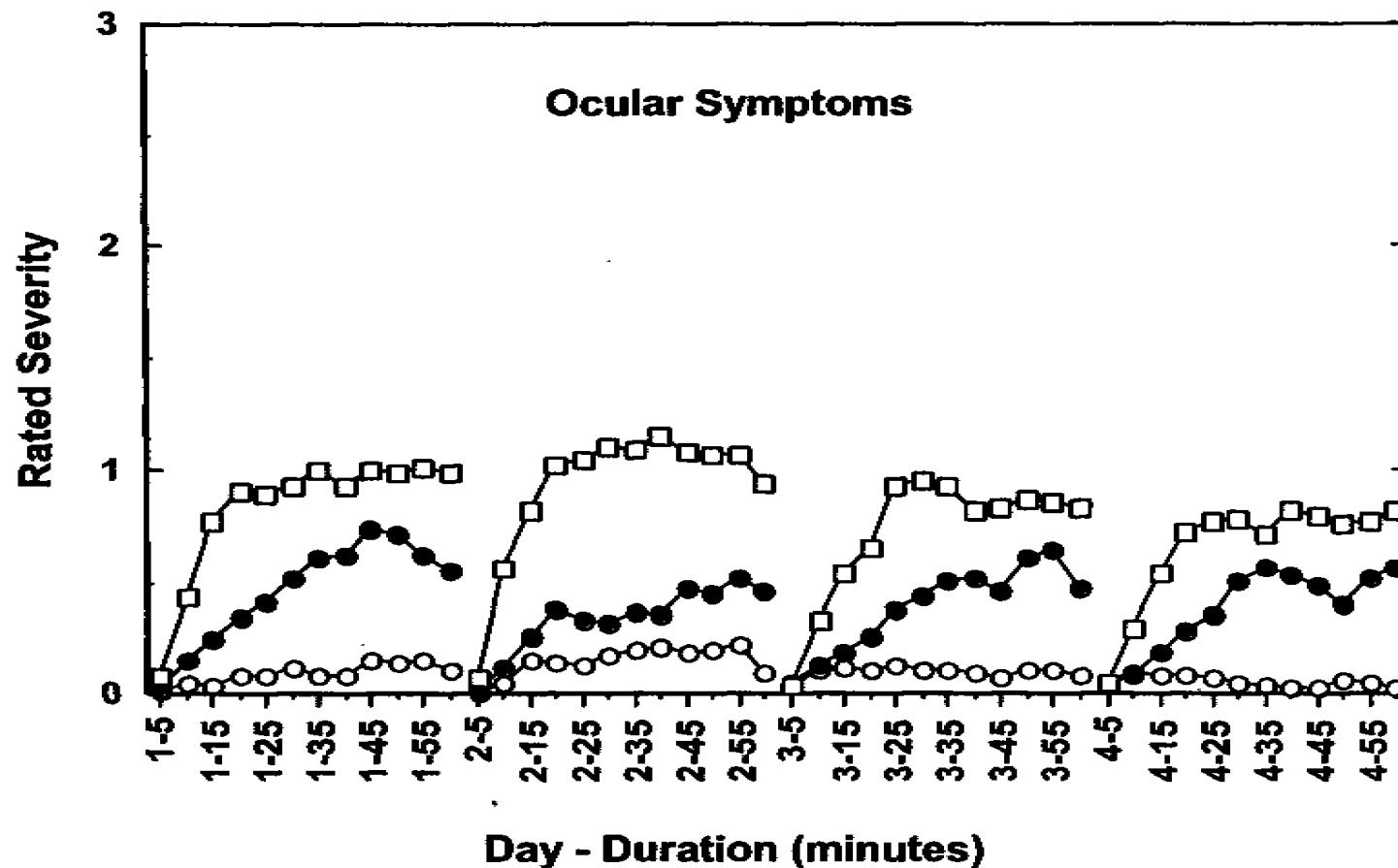
## Human sensory irritation study (Cain, 2004)

- Three phases
  - Phase 1 – Brief inhalation exposures (seconds)
  - Phase 2 – 20 minute exposure
  - Phase 3 – 1 hour exposure on 4 consecutive days
- DPR found this study acceptable
  - Conducted in accordance with GLP regulations and protocol approved by the IRB at U.C. San Diego
  - Protocol was reviewed by biostatistician to ensure there was sufficient statistical power
  - Approved by U.S. EPA's HSRB

# Acute Toxicity – 1 Hour Exposure (cont.)

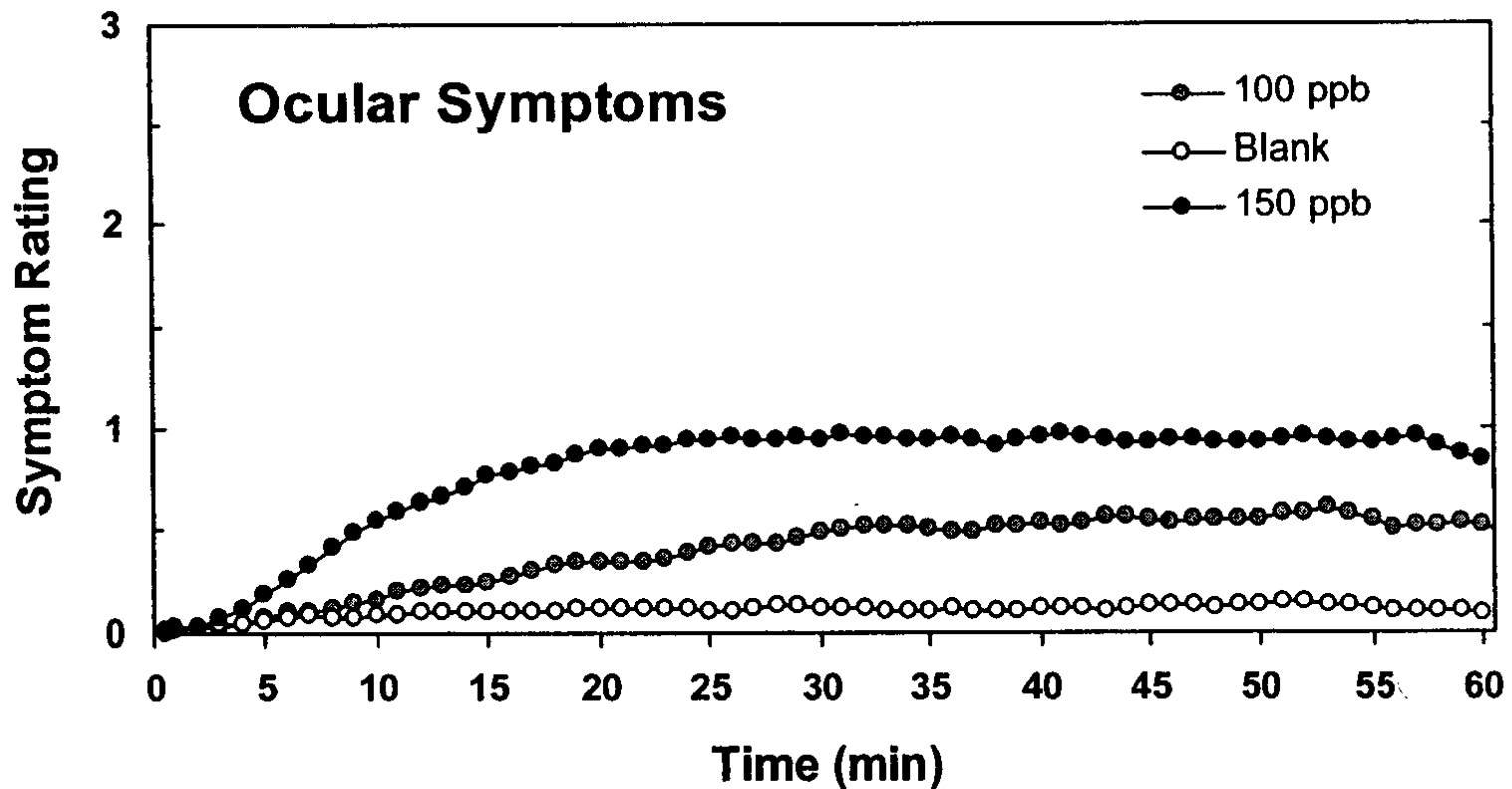
## Human Sensory Irritation Study, Phase 3

- 32 Young adult subjects – 15 males and 17 females
- Subjects exposed to 0, 100 or 150 ppb for 1 hour on 4 consecutive days
- Rated eye, nose and throat irritation on scale of 0 to 3 every minute during their 1-hour exposures
  - No nasal or throat irritation reported
  - Eye irritation at 100 and 150 ppb



**Figure 4** (p. 20). Average rated severity of ocular irritation by day of exposure of the human sensory irritation study for chloropicrin\*

\*(n = 32, males and females combined; blank = open circles, 100 ppb = solid circles; 150 = open squares)



**Figure 5** (abridged p. 21). Average rated severity of ocular irritation during 1- hour exposures during phase 3 of the human sensory irritation study for chloropicrin\*

\* (n = 32, males and females combined).

# Acute Toxicity - Human Sensory Irritation Study (cont.)

- Other respiratory variables evaluated in Phase 3
  - Lower respiratory variables unaffected
    - Nitric oxide (NO) concentration in expired pulmonary air
    - Pulmonary function (FVC and FEV<sub>1</sub>)
  - Upper respiratory variables affected
    - Nasal air flow reduced at 150 ppb
    - Elevated NO concentration in expired nasal air at 100 and 150 ppb



**Table 2** (p. 20). Ocular and Nasal Irritation in Human Subjects after 1-Hour Exposures for 4 Consecutive Days to Chloropicrin <sup>a</sup>

	Dose Level (ppb)		
	0	100	150
Ocular irritation			
Average score, overall <sup>b</sup>	0.10±0.19 <sup>c</sup>	0.39±0.39	0.76±0.71
Average score, plateau <sup>d</sup>	0.12±0.22	0.54±0.51	0.90±0.86
Nasal Irritation			
Average increase in NO <sup>e</sup> in expired nasal air	1.6±15.6	12.0±11.9	12.7±16.6

a Cain, 2004.

b Average severity score reported for every minute of 1 hour exposure for all four days of exposure. Severity score ranged from 0 (no irritation) to 3 (severe – hard to tolerate and can interfere with activities of daily living)

c mean ± standard deviation n = 32, males and females combined since no significant gender differences

d Plateau period was defined as minutes 30 to 55 when the maximum scores were observed.

e The average difference in nitric oxide (NO) concentration (ppb) in expired nasal air before and after exposure for each individual for all four days of exposure.

# Benchmark Dose Analysis for Human Study

- Threshold for identifying responders was estimated using the standard deviation in the control group
- Benchmark concentration at the 10% response level ( $BMCL_{10}$ ) was used for eye irritation rather than the default of 5% because this effect was mild and reversible
- $BMCL_{10}$  for eye irritation was 26 ppb
- $BMCL_{05}$  for increased NO in nasal air was 44 ppb

# Acute Toxicity – 8 and 24 Hour Exposures

## Rabbit Developmental Toxicity Study

- Pregnant rabbits exposed to vapors 6 hrs/day from GDs 7-21
- Maternal effects observed in first few days of exposure were considered acute
  - Deaths
  - Red discolored lungs and pulmonary edema
  - Clinical signs of sensory and respiratory irritation
  - Reduced body weights and food consumption
- Acute NOEL = 0.4 ppm  
(8 hr HEC – 270 ppb; 24 hr HEC – 92 ppb)

**Table 12** (abridged, p. 43). Acute Effects in Pregnant Rabbits Exposed to Chloropicrin Vapors During Gestation Days 7-20<sup>a</sup>

Endpoint	Dose Level (ppm)			
	0	0.4	1.2	2.0
Death	0 (0) <sup>b</sup>	0 (0)	1 (1)	8 (2)
Labored breathing	0 (0)	0 (0)	0 (1)	1 (2)
Excessive lacrimation	0 (0)	0 (0)	0 (1)	1 (2)
Nasal Discharge	0 (1)	0 (3)	7 (10)	1 (10)
Red discolored lungs	0 (0)	0 (0)	1 (2)	8 (2)
Edema in lungs	0 (0)	0 (0)	0 (1)	5 (2)
Body weight gain (g) GDs 7-13	-20 ±89	15 ±65	-243 ±165**	-407 ±194**
Food consumption (g) GDs 7-13	145 ±24	145 ±25	74 ±29**	32 ±28**

a York, 1993.

b Incidence outside and inside parentheses for GDs 7-11 and GDs 12-20, respectively. <sub>12</sub>

# Acute Toxicity – 8 and 24 Hour Exposures

## Rabbit Developmental Toxicity Study (cont.)

- 1-hr RfC for  $\uparrow$  NO in nasal air = 1.5 ppb for children, if additional uncertainty factor of 3 applied for children
- 8-hr RfC from rabbit study = 0.9 ppb for children applying an additional uncertainty factor of 3 for children
- Therefore, the 8-hr RfC derived from the rabbit study is still more health protective than 1-hr RfC from human study based on  $\uparrow$  NO in nasal air

# Subchronic Toxicity

## 90-Day Inhalation Toxicity Studies with Rats and Mice

- Exposure for 6 hrs/day, 5 days/wk for 13 weeks
- Effects at 1.03 ppm and higher
  - Mortalities and clinical signs
  - Reduced body weights and food consumption
  - Increased lung weights and pathological lesions in nasal cavity and lungs
- Benchmark dose analysis performed to determine most sensitive endpoint
  - Default 5% response level used since frank effects



## Tables 3 and 4 (abridged, p. 24-25). Respiratory Lesions in Mice Exposed to Chloropicrin Vapors for 90 Days<sup>a</sup>

Effect	Sex	Dose Level (ppm)			
		0	0.3	1.03	2.89
<b>Nasal Cavity</b> Epithelial Hyalin Inclusions	M	0/10	0/10	3/9	10/10**
	F	0/9	2/10	6/10*	8/10**
Rhinitis	M	0/10	1/10	1/9	10/10**
	F	1/9	0/10	4/10	9/10**
<b>Lungs</b> Alveolar Histiocytosis	M	2/10	1/10	5/9	9/10**
	F	1/9	2/10	8/10**	10/10**

a Chun and Kintigh, 1993

\*,\*\* Significantly different from controls at  $p < 0.05$  and  $0.01$ , respectively by Fisher's exact test

## Tables 5 and 6 (abridged, p. 27-28). Respiratory Lesions in Rats Exposed to Chloropicrin Vapors for 90 Days<sup>a</sup>

Effect	Sex	Dose Level (ppm)			
		0	0.3	1.03	2.89
<b>Nasal Cavity</b> Rhinitis	M	2/10	2/10	4/10	10/10**
	F	1/10	1/10	7/10*	8/10**
Goblet Cell Hyperplasia	M	7/10	7/10	8/10	9/10
	F	0/10	6/10*	7/10**	5/10*
<b>Lungs</b> Peribronchial Muscle Hyperplasia	M	0/10	0/10	3/10	8/10**
	F	0/10	0/10	6/10*	7/10**
Bronchial Epithelial Hyperplasia	M	0/10	0/10	4/10	9/10**
	F	0/10	0/10	5/10*	7/10**

<sup>a</sup> Chun and Kintigh, 1993

\*, \*\* Significantly different from controls at  $p < 0.05$  and  $0.01$ , respectively by Fisher's exact test



**Table 15** (abridged, p. 51). Benchmark Dose Analysis of the Most Sensitive Endpoints in Mouse and Rat Subchronic Inhalation Studies

Species	Endpoint	Sex	BMCL <sub>05</sub> (ppb)	HEC (ppb) Child/Adult
Mouse	Epithelial Hyalin Inclusions	M	360	200/413
		F	84	45/96
	Rhinitis	M	650	350/746
		F	210	110/241
	Alveolar Histiocytosis	M	140	76/161
		F	81	44/93
Rat	Rhinitis	M	320	93/196
		<b>F</b>	<b>120</b>	<b>34/73</b>
	Peribronchial Muscle Hyperplasia	M	220	64/135
		F	160	46/98
	Bronchial Epithelial Hyperplasia	M	200	58/122
		F	180	52/110

# Chronic Toxicity

## Chronic Inhalation Studies with Rats and Mice

- Exposed for 6 hrs/day, 5 days/wk for 78 weeks (mice) or 107 weeks (rats)
  - Effects in mice at 0.5 ppm and higher
    - Reduced body weights and food consumption
    - Pathological lesions in nasal cavity and lungs
  - Effects in rats at 0.5 ppm or higher
    - Clinical signs and reduced survival
    - Reduced body weights and increased lung weights
    - Rhinitis
- BMD analysis performed to determine the most sensitive endpoint

## Tables 7 and 8 (abridged, p. 30-31). Respiratory Lesions in Mice Exposed to Chloropicrin Vapors for 78 Weeks<sup>a</sup>

Effect	Sex	Dose Level (ppm)			
		0	0.1	0.5	1.0
<b>Nasal Cavity</b>					
Epithelial Hyalin Inclusions	M	3/50	6/50	7/50	16/50**
	F	10/50	11/50	24/50**	37/50**
Rhinitis	M	6/50	7/50	17/50**	35/50**
	F	3/50	6/50	18/50**	32/50**
<b>Lungs</b>					
Alveolar Histiocytosis	M	8/50	17/50	22/50	29/50*
	F	14/50	14/40	19/50	35/50**
Bronchiectasis	M	0/50	3/50	28/50**	41/50**
	F	0/50	5/50	28/50**	44/50**

a Burleigh-Flyer *et al.*, 1995

\*, \*\* Significantly different from controls at  $p < 0.05$  and  $0.01$ , respectively by Fisher's exact test.

**Table 9** (abridged, p. 33). Respiratory Lesions in Rats Exposed to Chloropicrin Vapors for 107 Weeks<sup>a</sup>

Effect	Sex	Dose Level (ppm)			
		0	0.1	0.5	1.0
Nasal Cavity Rhinitis	M	20/50	24/50	21/50	35/50**
	F	18/50	17/50	26/50	23/50

a Burleigh-Flyer and Benson, 1995

\*\* Significantly different from controls at  $p < 0.05$  and  $0.01$ , respectively by Fisher's exact test

**Table 17 (abridged, p. 54).** Benchmark Dose Analysis of the Most Sensitive Endpoints in Mouse and Rat Chronic Inhalation Studies

Species	Endpoint	Sex	BMCL <sub>05</sub> (ppb)	HEC (ppb) Child/Adult
Mouse	Rhinitis	M	130	70/149
		F	120	65/138
	Epithelial Hyalin Inclusions	M	290	160/333
		F	100	54/115
	Alveolar Histiocytosis	M	190	100/218
		F	150	82/172
	Bronchiectasis	M	50 (68)	27/57 (37/78)
		F	43* (59)	23/49 (32/68)
Rat	Rhinitis	M	230	67/141

\* A BMR of 2.5% used for bronchiectasis instead of 5% due to adversity of endpoint. BMCL<sub>05</sub> shown in parentheses.

# Weight of Evidence - Carcinogenicity

## Genotoxicity Studies

- Numerous positive assays
  - 8 Reverse mutation assays with *Salmonella*, usually with TA100 + S-9
  - *In vitro* Comet assay with TK6 cells
  - *In vitro* chromosomal aberrations assay with CHO cells
  - Sister chromatid exchange assay in human lymphocytes
- Significant negative assays
  - Forward mutation assay with mouse lymphoma cells
  - *In vitro* and *in vivo* micronucleus assays
  - *In vitro* chromosomal aberrations assay with human lymphocytes
- Based on these data, DPR concluded that a genotoxic mode of action for tumor formation may be possible

# Weight of Evidence – Carcinogenicity (cont.)

## Carcinogenicity Studies in Animals

### ● Inhalation Studies

- Increase in the combined incidence of adenomas and carcinomas in the lungs of female mice
  - Significant trend ( $p < 0.01$ ) and pairwise comparison ( $p < 0.05$ ), when adjusted for survival
  - Dose-related increase in the multiplicity of the tumors
  - Slight shortening of time-to-tumor at high dose



**Table 8** (abridged, p. 31). Possible Treatment-Related Neoplastic Lesions in the Lungs of Female Mice Exposed to Chloropicrin for 78 Weeks<sup>a</sup>

Lesion	Dose Level (ppm)			
	0	0.1	0.5	1.0
Lung Adenoma	13/48 <sup>+b</sup> (27%)	9/48 (19%)	17/47 (36%)	19/49 (39%)
Carcinoma	0/48 (0%)	4/48 (8%)	3/47 (6%)	4/49 (8%)
Combined Adenoma and Carcinoma	13/48 <sup>++</sup> (27%)	12/48 (25%)	20/47 (43%)	22/49 (45%)
Combined Adenoma and Carcinoma – Adjusted	13/42 <sup>++c</sup> (31%)	12/41 (29%)	20/43 (46%)	22/41 <sup>*</sup> (54%)

a Burleigh-Flyer *et al.*, 1995.

b Denominator is the number of animals that survived up to the day of the first tumor, 253 days.

c Animals at risk (denominator) determined by the Poly-3 trend test.

+, ++ Significant trend based on the Armitage-Cochran trend test at  $p < 0.05$  and  $0.01$ , respectively, except for the adjusted incidence which was based on Poly-3 trend test.

\* Significant at  $p < 0.05$  using the pairwise comparison from the Poly-3 trend test.



# Weight of Evidence – Carcinogenicity (cont.)

## Carcinogenicity Studies in Animals (cont.)

### Oral Studies

- Increase in mammary fibroadenomas of female rats
  - Significant by trend analysis ( $p < 0.05$ ) and pairwise comparison ( $p < 0.05$ )
- DPR concluded that the evidence was sufficient to warrant a quantitative assessment of carcinogenicity
- Cancer potency estimated to be  $2.3 \text{ (mg/kg/day)}^{-1}$  based on lung tumors in female mice

**Table 19** (abridged, p. 59). DPR Critical Endpoints and Human Equivalent Concentrations for Chloropicrin

Exposure Scenario	HEC (ppb) Child/Adult	Effects at LOEL
Acute 1 hr	26/26	Ocular irritation in humans
Acute 8 hr 24 hr	270/580 92/190	Mortalities, nasal discharge, ↓ body wts. & food consumption, red discoloration of lungs of pregnant rabbits
Seasonal	35/73	Rhinitis in female rats
Chronic	23/49	Bronchiectasis in female mice
Lifetime	Potency = 2.3 (mg/kg/day) <sup>-1</sup>	Lung tumors in female mice

# TAC Listing Criteria

$$\text{Margin of Exposure} = \frac{\text{HEC (ppb)}}{\text{Air Concentration (ppb)}}$$

- Generally, a MOE > 100 is considered protective of human health based on the following assumptions:
  - Humans are 10 times more sensitive than animals
  - 10-fold variation in sensitivity in the human population
- To not list as TAC, MOE > 1,000
  - For sensory irritation MOE > 30
    - No interspecies UF needed
    - Intraspecies UF = 3 since toxicokinetic differences not expected with direct-acting mechanism of toxicity

# TAC Listing Criteria

$$Risk = Potency (mg/kg/day)^{-1} \times Exposure (mg/kg/day)$$

## Carcinogenicity

- Risk  $< 10^{-6}$  is generally considered negligible
- To not list a TAC: Risk  $< 10^{-7}$

**Table 24** (abridged, p. 67). Worse Case Margins of Exposure for Bystanders Following Soil Fumigation with Chloropicrin

Exposure Duration	Margin of Exposure <sup>a</sup>		Target MOE for TAC Listing
	Children	Adult	
Acute – 1 hour Eye Irritation/human	0.0016	0.0016	30
Acute – 8 hour Deaths, lung path/rabbit	0.042	0.088	1,000
Acute – 24 hour Deaths, lung path/rabbit	0.084	0.18	1,000
Seasonal Rhinitis/rat	0.48	1.0	1,000
Annual Bronchiectasis/mice	0.76	1.6	1,000

a Margin of Exposure (MOE) = HEC / Air Concentration. HEC = Human Equivalent Concentration. Only MOEs for the application method with the highest worse case estimate is shown for each exposure duration.

**Table 30** (abridged, p. 75). Margins of Exposure for Bystanders Following Soil Fumigation with Chloropicrin Using 50<sup>th</sup> Percentile

Exposure Duration	Margin of Exposure <sup>b</sup>		Target MOE for TAC Listing
	Children	Adults	
Acute – 1 hour Eye irritation/human	0.0060	0.0060	30
Acute – 8 hour Deaths, lung path./rabbits	0.15	0.32	1,000
Acute – 24 hour Deaths, lung path./rabbits	0.25	0.52	1,000
a Margin of Exposure (MOE) = HEC / Air Concentration. HEC = Human Equivalent Concentration. Only MOEs for the application method with the highest exposure estimate for each exposure duration is shown using the 50 <sup>th</sup> percentile for application rate and field size.			

**Table 31** (abridged, p. 76). Margins of Exposure for Bystanders Following Soil Fumigation with Chloropicrin Using 50<sup>th</sup> Percentile and Half Mile from Field Edge<sup>a</sup>

Exposure Duration	Margin of Exposure <sup>b</sup>		Target MOE for TAC Listing
	Children	Adults	
Acute – 1 hour Eye irritation/human	0.024	0.024	30
Acute – 8 hour Deaths, lung path./rabbits	0.62	1.3	1,000
Acute – 24 hour Deaths, lung path./rabbits	2.5	5.2	1,000
<p>a Margin of Exposure (MOE) = HEC / Air Concentration. HEC = Human Equivalent Concentration. Only MOEs for the application method with the highest exposure estimate for each exposure duration is shown using the 50<sup>th</sup> percentile for application rate and field size and assuming the bystander is standing ½ mile from the field edge.</p>			



**Table 25** (abridged, p.68). Estimated Cancer Risks for Bystanders Exposed to Chloropicrin Following Soil Fumigation<sup>a</sup>

Application Method	Residential		Occupational	
	MLE	95% UB	MLE	95% UB
Bedded, tarped	$3.4 \times 10^{-2}$	$5.6 \times 10^{-2}$	$2.0 \times 10^{-2}$	$3.2 \times 10^{-2}$
a Target risk level for listing purposes is less than $1 \times 10^{-7}$ .				



**Table 26** (abridged, p. 69). Margins of Exposure for Bystanders Following Structural Fumigation with Chloropicrin

Exposure Duration	Margin of Exposure <sup>b</sup>		Target MOE for TAC Listing
	Children	Adults	
Acute – 1 hour Eye irritation/human	0.72	0.72	30
Acute – 8 hour Deaths, lung path./rabbits	27	57	1,000
Acute – 24 hour Deaths, lung path./rabbits	12	26	1,000
a Margin of Exposure (MOE) = HEC / Air Concentration. HEC = Human Equivalent Concentration.			

**Table 27** (abridged, p. 69). Margins of Exposure for Indoor Air Following Structural Fumigation with Chloropicrin

Exposure Duration	Margin of Exposure <sup>b</sup>		Target MOE for TAC Listing
	Children	Adults	
Acute – 1 hour Eye irritation/human	0.057	0.057	30
Acute – 8 hour Deaths, lung path./rabbits	1.5	3.2	1,000
Acute – 24 hour Deaths, lung path./rabbits	0.54	1.1	1,000
a Margin of Exposure (MOE) = HEC / Air Concentration. HEC = Human Equivalent Concentration.			

**Table 28** (abridged, p. 70). Margins of Exposure for Bystanders Following Enclosed Space Fumigation with Chloropicrin

Exposure Duration	Margin of Exposure <sup>b</sup>		Target MOE for TAC Listing
	Children	Adults	
Acute – 1 hour Eye irritation/human	0.0011	0.0011	30
Acute – 8 hour Deaths, lung path./rabbits	0.040	0.085	1,000
Acute – 24 hour Deaths, lung path./rabbits	0.018	0.039	1,000
Annual Bronchiectasis/mice	1.1	2.4	1,000
a Margin of Exposure (MOE) = HEC / Air Concentration. HEC = Human Equivalent Concentration.			

# Estimated Cancer Risk for Bystanders Exposed to Chloropicrin Following Enclosed Space Fumigation

Exposure Scenario	MLE	95% UB
Enclosed Space Fumigation	$7.4 \times 10^{-2}$	$1.2 \times 10^{-1}$

**Table 32** (abridged, p. 81). Comparison of DPR's and USEPA's Reference Concentrations

Exposure Duration	DPR RfC (ppb)		USEPA RfC (ppb)	
	Child	Adult	Residential	Occupational
Acute	8.7 UF=3 <sup>a</sup>	8.7 UF=3	73 UF=1 <sup>b</sup>	73 UF=1
Seasonal	0.35 UF=100 <sup>c</sup>	0.73 UF=100	0.27 UF=30 <sup>d</sup>	1.2 UF=30
Chronic	0.23 UF=100	0.49 UF=100	0.13 UF=30	0.50 UF=30

a UF = Uncertainty factor used to derive RfC. For eye irritation in humans, DPR assumed toxicokinetic variation = 1 and toxicodynamic variation = 3 for intraspecies variation.

b USEPA assumed both toxicokinetic and toxicodynamic variation for eye irritation in humans are 1.

c DPR did not use RGDR adjustment factor in calculating HEC from animal studies and instead used a default uncertainty factor of 10 for interspecies variation

d USEPA reduced the interspecies uncertainty factor to 3 since they used an RGDR adjustment in their HEC calculation.

# Other Toxicity Issues Evaluated

## ● Prenatal and Postnatal Sensitivity

- Fetal NOELs  $\geq$  maternal NOELs in developmental toxicity studies in rats and rabbits
  - Fetal effects were nonspecific signs, possibly secondary to maternal toxicity
- Pup NOEL  $\geq$  parental NOEL in rat reproductive toxicity study
- Neonates were not exposed directly from birth to PD28 and could be more sensitive due to the immaturity of their respiratory system, immune system and metabolic enzymes.
  - An additional uncertainty for children may be appropriate

## ● Endocrine effects

- Some reproductive effects, but unclear if endocrine-related
  - Reduced number of implantation sites
  - Increased pre- and post-implantation losses
  - Late-term abortions

# Conclusions

## Soil fumigation

- All of the bystander MOEs are significantly less than the target MOEs
- The cancer risk estimates are significantly greater than the target risk level of  $10^{-7}$
- Clearly meets criteria for listing as a TAC

## Structural fumigation

- All of the bystander MOEs are significantly less than their target MOEs
- MOEs for indoor air are also significantly less than their target MOEs
- Clearly meets criteria for listing as a TAC

## Enclosed space fumigation

- Bystander MOEs are significantly less than target MOEs
- The cancer risk estimates are significantly greater than the target risk level of  $10^{-7}$
- Clearly meets the criteria for listing as a TAC